

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

National Rifle Association of America Political Victory Fund

ADDRESS (number and street)

11250 Waples Mill Road

☐Check if different
than previously
reported. (ACC)

Fairfax

VA

22030

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00053553

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

☐☐☐in the
State of☐(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

01

01

2011

through

01

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mary Rose Adkins

Signature of Treasurer

Electronically Filed by Mary Rose Adkins

Date

08

25

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment corrects an outstanding debt owed to our committee that was reported on Schedule D, Line 10 as a negative balance. The outstanding debt owed to us should have been reported on Schedule D, Line 9. This amendment also updates any employment information for Line 11, Schedule A, which has been received since the last report.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 1D D
3 1Y Y Y Y
2 0 1 1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2011		3129515.72
(b) Cash on Hand at Beginning of Reporting Period	3129515.72	
(c) Total Receipts (from Line 19)	50781.39	50781.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3180297.11	3180297.11
7. Total Disbursements (from Line 31)	110072.75	110072.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3070224.36	3070224.36
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	15067.11	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	128957.87	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	3800.00	3800.00
(ii) Unitemized	46980.05	46980.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)	50780.05	50780.05
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	50780.05	50780.05
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.34	1.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	50781.39	50781.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	50781.39	50781.39

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	76806.35	76806.35	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	76806.35	76806.35	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-4000.00	-4000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	37266.40	37266.40	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	110072.75	110072.75	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110072.75	110072.75	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	50780.05	50780.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50780.05	50780.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	76806.35	76806.35
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	76806.35	76806.35

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

ALAN C BAILEY

Mailing Address 119 GREENCREST LN

City

PRATTVILLE

State

AL

Zip Code

36067-1903

FEC ID number of contributing
federal political committee.

C

Name of Employer
HHB ENGINEERS, P.C.

Occupation

CONSULTING ENGINEER / PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Transaction ID: 38774322

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MRS LOIS H LAZARO

Mailing Address 6040 RIVER CHASE CIR NW

City

ATLANTA

State

GA

Zip Code

30328-3561

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

HOMEMAKER / RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	1	1

Transaction ID: 38774352

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR VICTOR B TATE, II

Mailing Address 4446 BANNOCK DR

City

BOZEMAN

State

MT

Zip Code

59715-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	1	1

Transaction ID: 38774849

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR PETER M SPINNER

Mailing Address 370 WADSWORTH ST

City

MIDDLETOWN

State

CT

Zip Code

06457-4062

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEAZLEY COMPANY

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: 38774960

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

MR LOWELL H TODD, SR

Mailing Address 7560 TODD LN

City

MARDELA SPRINGS

State

MD

Zip Code

21837-2464

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: 38775150

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MR MICHAEL BEIDLEMAN

Mailing Address 19617 MARINE VIEW DR SW

City

NORMANDY PARK

State

WA

Zip Code

98166-4117

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALSTATE TRANS

Occupation
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: 38775787

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RONALD PETRINI

Mailing Address 2310 STARKEY RD

City

LARGO

State

FL

Zip Code

33771-3852

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREAT BAY DISTRIBUTORS,
INCOccupation
OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: 38775868

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

DAVID DEAN

Mailing Address 626 SAILBOAT DR

City

NICEVILLE

State

FL

Zip Code

32578-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	1

Transaction ID: 38775948

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MR JERRY SOLITA

Mailing Address 1990 FRANK MOORE RD

City

CULLEOKA

State

TN

Zip Code

38451-2141

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS COMPANYOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	1	1

Transaction ID: 38775997

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LANCE WILSON

Mailing Address 4616 260TH AVE

City

CLARKFIELD

State

MN

Zip Code

56223-3525

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FARMER

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Transaction ID: 38776000

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

3800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 22

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Bank of the West

Mailing Address 224 Box Butte Avenue

City

State

Zip Code

Alliance

NE

69301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

0.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: 38782891

Amount of Each Receipt this Period

0.67

Interest Income

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 10501 Main Street

City

State

Zip Code

Fairfax

VA

22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

0.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: 38782947

Amount of Each Receipt this Period

0.40

Interest Income

C.

Full Name (Last, First, Middle Initial)

BB&T Bank

Mailing Address 11230 Waples Mill Road

City

State

Zip Code

Fairfax

VA

22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

0.27

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 1

Transaction ID: 38782978

Amount of Each Receipt this Period

0.27

Interest Income

SUBTOTAL of Receipts This Page (optional)

1.34

TOTAL This Period (last page this line number only)

1.34

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Communications Corporation of America

Mailing Address 13195 Freedom Way

City Boston State VA Zip Code 22713

Purpose of Disbursement
NRA-PVF Fundraising Postage

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38263586

Date of Disbursement

01 / 10 / 2011

Amount of Each Disbursement this Period

74292.09

NRA-PVF Fundraising Postage

B. Full Name (Last, First, Middle Initial)
National Rifle Association of America

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Website Hosting / Service Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38263592

Date of Disbursement

01 / 10 / 2011

Amount of Each Disbursement this Period

1500.00

Website Hosting / Service Fee

C. Full Name (Last, First, Middle Initial)
Oklahoma Ethics Commission

Mailing Address 2300 N. Lincoln Blvd., Room B-5

City Oklahoma City State OK Zip Code 73105-4812

Purpose of Disbursement
Annual Filing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38263597

Date of Disbursement

01 / 10 / 2011

Amount of Each Disbursement this Period

50.00

Annual Filing Fee

SUBTOTAL of Disbursements This Page (optional)

75842.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Tennessee Registry of Election Finance

Mailing Address 404 James Robertson Pkwy, Suite 1

City Nashville State TN Zip Code 37243

Purpose of Disbursement

Annual Filing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38263676

Date of Disbursement

01 / 10 / 2011

Amount of Each Disbursement this Period

100.00

Annual Filing Fee

B.

Full Name (Last, First, Middle Initial)

Wisconsin Government Accountability Board - Elections Division

Mailing Address 212 E. Washington Ave., 3rd Floor
P.O. Box 7984

City Madison State WI Zip Code 53707-7984

Purpose of Disbursement

Annual Filing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38576735

Date of Disbursement

01 / 28 / 2011

Amount of Each Disbursement this Period

100.00

Annual Filing Fee

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 10501 Main Street

City Fairfax State VA Zip Code 22030

Purpose of Disbursement

Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38782231

Date of Disbursement

01 / 03 / 2011

Amount of Each Disbursement this Period

27.24

Credit Card Fees

SUBTOTAL of Disbursements This Page (optional)

227.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 10501 Main Street

City
Fairfax

State
VA

Zip Code
22030

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38782257

Date of Disbursement

01 / 04 / 2011

Amount of Each Disbursement this Period

6.88

Credit Card Fees

B.

Full Name (Last, First, Middle Initial)

American Express Company

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38782289

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

6.06

Credit Card Fees

C.

Full Name (Last, First, Middle Initial)

PAYMENTECH, INC.

Mailing Address 4 NORTHEASTERN BLVD

City
SALEM

State
NH

Zip Code
03079

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38782414

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

91.89

Credit Card Fees

SUBTOTAL of Disbursements This Page (optional)

104.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 38782463 Date of Disbursement																				
Mailing Address P.O. Box 2080	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	1												
<table border="1"> <tr> <td>City Jacksonville</td> <td>State FL</td> <td>Zip Code 32231</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Account Analysis Fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Jacksonville	State FL	Zip Code 32231	Purpose of Disbursement Account Analysis Fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>114.72</div>												
City Jacksonville	State FL	Zip Code 32231																			
Purpose of Disbursement Account Analysis Fees		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Account Analysis Fees																				
B. Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 38782539 Date of Disbursement																				
Mailing Address P.O. Box 2080	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	1												
<table border="1"> <tr> <td>City Jacksonville</td> <td>State FL</td> <td>Zip Code 32231</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Account Analysis Fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Jacksonville	State FL	Zip Code 32231	Purpose of Disbursement Account Analysis Fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>225.72</div>												
City Jacksonville	State FL	Zip Code 32231																			
Purpose of Disbursement Account Analysis Fees		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Account Analysis Fees																				
C. Full Name (Last, First, Middle Initial) Bank of America - NY	Transaction ID: 38782573 Date of Disbursement																				
Mailing Address 671 County Route 1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	8		2	0	1	1												
<table border="1"> <tr> <td>City Pine Island</td> <td>State NY</td> <td>Zip Code 10969</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Account Analysis Fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Pine Island	State NY	Zip Code 10969	Purpose of Disbursement Account Analysis Fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>19.73</div>												
City Pine Island	State NY	Zip Code 10969																			
Purpose of Disbursement Account Analysis Fees		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Account Analysis Fees																				

SUBTOTAL of Disbursements This Page (optional)

360.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 38782615 Date of Disbursement																				
Mailing Address P.O. Box 2080	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	1												
City Jacksonville State FL Zip Code 32231	Amount of Each Disbursement this Period																				
Purpose of Disbursement Account Analysis Fees Candidate Name	<table border="1"> <tr> <td colspan="10">15.25</td> </tr> </table>	15.25																			
15.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	Account Analysis Fees																				
B. Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 38782679 Date of Disbursement																				
Mailing Address P.O. Box 2080	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	1												
City Jacksonville State FL Zip Code 32231	Amount of Each Disbursement this Period																				
Purpose of Disbursement Account Analysis Fees Candidate Name	<table border="1"> <tr> <td colspan="10">15.37</td> </tr> </table>	15.37																			
15.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	Account Analysis Fees																				
C. Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 38782738 Date of Disbursement																				
Mailing Address P.O. Box 2080	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	1												
City Jacksonville State FL Zip Code 32231	Amount of Each Disbursement this Period																				
Purpose of Disbursement Account Analysis Fees Candidate Name	<table border="1"> <tr> <td colspan="10">227.40</td> </tr> </table>	227.40																			
227.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	Account Analysis Fees																				

SUBTOTAL of Disbursements This Page (optional)

258.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Bank of America - MO

Mailing Address 1500 St. Louis Avenue

City
St. Louis

State
MO

Zip Code
63106

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 38782851

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2011

Amount of Each Disbursement this Period

14.00

Account Analysis Fees

SUBTOTAL of Disbursements This Page (optional)

14.00

TOTAL This Period (last page this line number only)

76806.35

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

BlueFront Strategies, LLC

Mailing Address 44 Canal Center Plaza, Suite G1

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Independent Expenditure - Online Advertising

Candidate Name
Scott Walker

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 38594646

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

33933.00

Independent Expenditure -
Online Advertising

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Jim Suttle

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 38598243

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

2282.67

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postcards

Candidate Name
Jim Suttle

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 38598804

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

1050.73

Independent Expenditure -
Postcards

SUBTOTAL of Disbursements This Page (optional)

37266.40

TOTAL This Period (last page this line number only)

37266.40

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Re-Elect Tim Griffin For Congress Committee

Mailing Address P.O. Box 7526

City
Little Rock

State
AR

Zip Code
72217

Purpose of Disbursement

Void - Tim Griffin For Congress Campaign Committee

Candidate Name

Mr. John Griffin

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 02

Transaction ID: 38776091

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

-2000.00

Void - Tim Griffin For Co-
ngress Campaign Committee

B.

Full Name (Last, First, Middle Initial)

Southerland For Congress

Mailing Address PO Box 1692

City
Lynn Haven

State
FL

Zip Code
32444

Purpose of Disbursement

Void - Southerland For Congress

Candidate Name

Rep. William Southerland

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 02

Transaction ID: 38776094

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

-2000.00

Void - Southerland For Co-
ngress

SUBTOTAL of Disbursements This Page (optional)

-4000.00

TOTAL This Period (last page this line number only)

-4000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 / 22

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 BlueFront Strategies, LLC

 Nature of Debt (Purpose):
 On Line Advertisng

Mailing Address 44 Canal Center Plaza, G1

City	State	ZIP Code
Alexandria	VA	22314

Outstanding Balance Beginning This Period

82933.00

Transaction ID: 41809559

Amount Incurred This Period

0.00

Payment This Period

33933.00

Outstanding Balance at Close of This Period

49000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Prolist, Inc.

 Nature of Debt (Purpose):
 E-Mail Alert

Mailing Address 8341 Beechcraft Avenue

City	State	ZIP Code
Gaithersburg	MD	20879

Outstanding Balance Beginning This Period

1834.26

Transaction ID: 41809560

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1834.26

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Prolist, Inc.

 Nature of Debt (Purpose):
 Postage

Mailing Address 8341 Beechcraft Avenue

City	State	ZIP Code
Gaithersburg	MD	20879

Outstanding Balance Beginning This Period

36481.28

Transaction ID: 41809561

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36481.28

1) **SUBTOTALS** This Period This Page (optional).....

87315.54

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 22

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Prolist, Inc.Nature of Debt (Purpose):
Postcards

Mailing Address 8341 Beechcraft Avenue

City State ZIP Code
Gaithersburg MD 20879

Outstanding Balance Beginning This Period

30642.33

Transaction ID: 41809562

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30642.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Federal Capitol Communications CorporationNature of Debt (Purpose):
Radio Ad Production Cost

Mailing Address 1120 G Street, NW Suite 600

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

11000.00

Transaction ID: 41809563

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

41642.33

2) **TOTALS** This Period (last page this line number only)..... ▶

128957.87

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

128957.87

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 / 22

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
OnMessage, Inc.Nature of Debt (Purpose):
Overpayment of TV Production Credit less outstanding Invoices for Federal and State candidates

Mailing Address 815 Slaters Lane

City	State	ZIP Code
Alexandria	VA	22314

Outstanding Balance Beginning This Period

15067.11

Transaction ID: 41809564

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15067.11

1) **SUBTOTALS** This Period This Page (optional).....

15067.11

2) **TOTALS** This Period (last page this line number only).....

15067.11

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

15067.11